



**North Carolina Department of Health and Human Services
Division of Mental Health, Developmental Disabilities and Substance Abuse
Services**

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Michael F. Easley, Governor
Carmen Hooker Odom, Secretary

Michael Moseley, Director

March 17, 2005

MEMORANDUM

TO: Area Directors
CAP-MR/DD Coordinators

FROM: Mike Moseley 

RE: Transition to new CAP-MR/DD Waiver

Subject to approval from the federal Centers for Medicare and Medicaid Services, we anticipate implementation of the new comprehensive 1915(c) Home and Community Based waiver for persons with mental retardation (CAP/MR/DD) will be July 1, 2005. In preparation for the transition from the current CAP/MR/DD waiver to the new waiver, a variety of issues must be addressed in order to promote a smooth transition for all waiver recipients. The following provides guidance and instruction regarding this transition:

- Crosswalk from old service definitions to new service definitions:
 - A crosswalk grid is attached to this letter and additionally is posted to the Division website. For old service definitions that crosswalk directly to a new service definition with no changes (change in name only), the cost summary must be revised using the new Cost Summary format to reflect any rate change and service code change. A new service order must be issued.
 - For service definitions that do not crosswalk directly from an old service to a new service, a Plan of Care update form must be completed as well as a revised Cost Summary and service order.
 - For individuals who were previously receiving Supported Living services but will now receive Residential Supports based on living in a licensed residential setting or unlicensed AFL, it will be critical to insure that the current NC-SNAP score for the individual is accurate. The level of Residential Supports provided to an individual is based on the SNAP index score, which is derived by multiplying the total raw score times the overall level. Once determination is made as to level of Residential Supports it will be necessary to revise the Cost Summary and issue a new service order.
- Transition to new Plan of Care and Cost Summary:
 - Transition to the new Plan of Care format and Cost Summary will occur during the Continued Need Review process. For revisions required prior to the CNR, including those noted above, the new Plan of Care update form must be used.



- Transition to Utilization Review Guidelines:
 - Implementation of the Utilization Review Guidelines will not occur until the new waiver goes into effect on July 1, 2005. Transition to use of the Guidelines will occur when an individual's Plan of Care is being reviewed by the service authorization unit of the LME during the Continued Need Review process. It is critical to note that the application of the Guidelines occurs at the service authorization unit of the LME and not by the case manager. The Guidelines are not meant to be used as a means of determining the amount of services reflected on a Plan of Care. As has been noted in previous correspondence, the Guidelines are intended to be used as guidance and an opportunity for additional discussion when service needs are higher or lower than the Guidelines indicates.

During the month of April and May, regional training events for LMEs and providers will be scheduled to address the specifics of the new waiver and the process of transition. Topics will include such issues as assessment and level of care determination, the Utilization Review Guidelines, and new Plan of Care and Cost Summary formats. It is anticipated that the training and ongoing information provided will enable the transition from one waiver to another to be a smooth one. During this transition process waiver recipients and their families must be informed of changes that will be taking place on an ongoing basis. LMEs and case managers may not use the transition to the new waiver as an opportunity to reduce services without application of the person centered planning process.

cc: Secretary Carmen Hooker Odom
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